PAGE 1 / 4

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) California Water Service Group Political Action Committee 621 Capitol Mall, Suite 2500 ADDRESS (number and street) (Check if address is changed) Sacramento 95814 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS dhuck@nossaman.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2021 C00357608 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. , Justin Skarb, , , Type or Print Name of Treasurer , Justin Skarb, , , [Electronically Filed] 06 15 2021 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

	EEC Eo	rm 1 (Pavisad 02/2000)	Page 2				
		omm 1 (Revised 02/2009) OMMITTEE	i aye Z				
Can	didate	idate Committee:					
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)				
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the car information below.)						
Name Cand	e of didate						
	didate / Affiliati	on Office Sought: House Senate President	State				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name Cand	e of lidate						
Part	ty Con	Committee:					
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.				
Poli	tical A	ction Committee (PAC):					
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is a:				
		Corporation Corporation w/o Capital Stock	Labor Organization				
		Membership Organization Trade Association	Cooperative				
		In addition, this committee is a Lobbyist/Registrant PAC.					
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or procommittee. (i.e., nonconnected committee)					
		In addition, this committee is a Lobbyist/Registrant PAC.					
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
Join	t Fund	raising Representative:					
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for troommittees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political				
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political				
	Com	Committees Participating in Joint Fundraiser					
	1.	FEC ID number					
	2.	FEC ID number					
	3.	FEC ID number					
	4.						

	_			_			
_	FEC Form 1 (Revised	·		Page 3			
	Write or Type Committee Name		itiaal Astian Comm	vittoo			
_		er Service Group Poli	lical Action Comm	iillee			
6.	Name of Any Connected (Organization, Affiliated Committee, Joi	nt Fundraising Representative, or l	Leadership PAC Sponsor			
C	California Water Servi	ce Company					
ī							
		1720 North First Street					
	Mailing Address						
		San Jose	CA 9	95112 			
		CITY	STATE	ZIP CODE			
	Relationship: x Connecte	d Organization Affiliated Committee	Joint Fundraising Representative	Leadership PAC Sponsor			
7.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.						
	Fung, Juli	a, , ,					
	Full Name	,1720 North First Street					
	Mailing Address						
		San Jose	CA CA	95112			
	Title or Position	CITY	STATE	ZIP CODE			
	Custodian of Records		Telephone number 408	8200			
8.	Treasurer : List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).						
	Full Name Skarb, Just of Treasurer	stin, , ,					
	Mailing Address	1720 North First Street					
	-						
		San Jose		95112			
		CITY	STATE	ZIP CODE			
	Title or Position	CITY					
	Treasurer		Telephone number 310	_ - 257 - 1485			

FEC Form	1 (Revised 02/2009)		Page 4				
Full Name of Designated Agent	Huck, Dawn E., , ,						
Mailing Address	621 Capitol Mall, Suite 2500						
		CA 95814 ATE	ZIP CODE				
Title or Position Assistant Treasu	rer 	916	442				
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rent safety deposit boxes or maintains funds. Name of Bank, Depository, etc. First Foundation Bank							
Mailing Address	1601 Response Road, Suite 190						
	Sacramento	CA 95815					
	CITY SI	TATE	ZIP CODE				
Name of Bank, Depository, etc.							
Mailing Address							
			-				